

Date Rec'd	_____
Fees Paid	_____
Ack.	_____

PRESCHOOL ONLY
AM MWF CLASS ___
PM MWF CLASS ___
TTH CLASS ___
PRE-KIND. ___

**Our Savior's Lutheran School
New Student Registration For Admission**

(I/We) wish to enroll (my/our) child for the 2012-2013 school year subject to the terms of this application, the contract, the general statements, rules, regulations, conditions, traditions and financial terms as indicated in the family handbook, calendar, and fee schedule. (I/We) enclosed a **non-refundable** registration fee (see current fee schedule) of \$ _____ for the following student:

(PLEASE PRINT)

Student Name _____ will be in grade _____

Student Birth date _____ Do you plan to attend OSLS for elementary school? Yes/No

Father's Name _____	Mother's Name _____
Home Address _____	Home Address _____
City _____ State ____ Zip _____	City _____ State ____ Zip _____
HM _____ - _____ - _____ Cell _____ - _____ - _____	HM _____ - _____ - _____ Cell _____ - _____ - _____
Email _____	Email _____
Occupation _____	Occupation _____
Job Title _____	Job Title _____
Name of Firm _____	Name of Firm _____
Work # _____	Work # _____
Address _____	Address _____
City _____ State ____ Zip _____	City _____ State ____ Zip _____

FAMILY INFORMATION

Are parents divorced? Yes ___ No ___ Separated? Yes ___ No ___

Who has legal custody? _____

Child(ren) live with _____

Siblings Name _____ Age _____ School _____

Paternal Grandparents (if living) Maternal Grandparents (if living)

Name _____ Name _____

Address _____ Address _____

City _____ State ____ Zip _____ City _____ State ____ Zip _____

() _____ - _____ () _____ - _____

Please indicate general academic level of your child's previous work:
Excellent ____ Very Good ____ Average ____ Areas of difficulty ____

Is your child regularly taking any prescription medicine? Yes ____ No ____

Name of Medication _____

Please note below if school personnel have ever reported any of the following about your child, or if you have observed these characteristics at home.

____ Distractible ____ disturbs other children ____ is often late in completing assignments
____ Exhibits aggressive behavior ____ has difficulty following oral or written directions
____ has difficulty with oral or written expression

CHURCH AFFILIATION

Denomination _____ Name of Church _____

Location _____ Member? ____ Yes ____ No

Attendance: ____ Regular ____ Sometimes ____ Seldom

GENERAL INFORMATION

Indicate who is responsible for tuition _____

Would you like your address and phone number in the school directory? ____ Yes ____ No

How were you referred to our school? (Name of person) _____

This school has a racially nondiscriminatory policy. OSLS shall make no distinction in its admission or educational services on the grounds of race, color, or national origin. The registration fee is payable with the application and is **non-refundable** unless the student is not accepted.

1. (I/We) understand that tuition payments are due promptly according to your SMART contract.
2. (I/We) hereby obligate for payment of the full year's tuition and fees. (I/We) agree that (my/our) child will not be allowed to attend classes unless tuition is paid by stated deadlines.
3. (I/We) understand that once accepted, (my/our) child is entered for the entire year and that no reduction of the full year's tuition and fee obligation can be made for absence, voluntary or involuntary withdrawal, or expulsion.
4. A positive and constructive working relationship between Our Savior's Lutheran School and a student's parents/guardian is essential to the fulfillment of Our Savior's educational purpose. (I/We) understand, therefore, that Our Savior's reserves the right not to extend the privilege of enrollment or re-enrollment to a student if Our Savior's reasonably concludes that the actions of a parent(s) guardian(s) make such a positive and constructive relationship impossible or otherwise seriously interferes with Our Savior's accomplishment of its educational purpose.

Signature(s) of parent(s) / guardian

Date